CLAIM OF: DAVID OLORUNFEMI P. O. Box 89174

Atlanta, Georgia 30312

result of a vehicular accident on February 25, For damages alleged to have been sustained as a

2000 at Interstate 75/85 and Freedom Parkway.

APPROVED THIS ADVERSED REPORT IS

ROSALIND RUBENS NEWELL Pubers Tours

DEPUTY CITY ATTORNEY

ATLANIA CHY COUNCIL SELL 5 2000

CHYCOUNCIL JUL 0 5 2000



00- **№** -0920

ADVINCE REPORT



RHONDA DAUPHIN JOHNSON, CMC MUNICIPAL CLERK

July 18, 2000

55 TRINITY AVENUE, S.W. SECOND FLOOR, EAST SUITE 2700 ATLANTA, GEORGIA 30335 (404) 330-6033 FAX (404) 658-6103

David Olorunfemi P.O. Box 89174 Atlanta, GA 30312

00-R-0920

Dear Mr. Olorunfemi:

I sincerely regret that you have been adversely affected by the circumstances raised in your claim for damages against the City of Atlanta. Your time and patience in this matter has been greatly appreciated.

However, I must notify you that the Atlanta City Council Adopted an Adverse Report on your claim at its regular meeting on July 05, 2000. In consultation with the City's Law Department, who conducted an investigation of the situation, the Council has determined that the City cannot accept responsibility for this matter and therefore cannot pay this claim.

If you desire any further information, please contact the City Attorney's Office/Claims Division at (404) 330-6400.

Sincerely,

Rhonda Dauphin Johnson, CMC Municipal Clerk

cc: Claims Division/Law Department

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. <u>00L0223</u>				Date:Jui	ne 6, 2000	
Claimant /VictimD	AVID OLORUNFEM	П				
				<u> </u>		
BY: (Atty) (Ins. Co.) Address: P.	O. Box 89174, Atlant	ta, Georg	ria 30312			
Subrogation: Claim	for Property damage	\$ 1.73	38.61	Bodily	Injury \$	
Date of Notice: <u>04/06/00</u>						
Conforms to Notice: O.C.G.A.						
Date of Occurrence02/25/	00	Place:	Interstate 75	/85 and Freed	om Parkwa	y
Department Police						
Employee involved			Disciplinary A	Action:		
NATURE OF CLAIM: The c	elaimant alleges the C	itv was n	egligent in its	failure to pro	vide a nolic	e report of a vehicular
accident he was involved in wit						
record of the claimant's acciden						
INVESTIGATION:						
Statements: City employee _	Claimant _		_ Others	Writte	en	Oral
Pictures Diagrams	Reports: 1	Police	X De	pt Report		Other
Traffic citations issued: City I	Oriver		_ Claimant Dri	iver		
Citation disposition: City Dri	ver		Claimant Driv	ver		
BASIS OF RECOMMENDA	TION:					
E d C would	37		Ministerial			
Function: Governmental Improper Notice	X		Other	V Da		
City and invalued	More than Six Month	S	Other _	Da	mages reasc	Madie
City not involved	One	rejected	Danair/ranla	Compromis	se settiemen	.t
Repair/replacement by Ins. Co Claimant Negligent	City Magligant		_Kepan/repiac	Cla	y roices	ned
Claimant Negligent	City Negligent_		JOIIIL	Cla	IIII Abando	nieu
			Respectful	lly submitted,	-	
		_	~ 1		/	
				(//	. ///	, <u> </u>
		1	(/////		مساركي	(e)
			NVESTI	GATOR - DIA	ANNE C M	UTCHELI
	,		/IIII	3711 OK - D17	HVIL C. IV	TOTLLL
RECOMMENDATION: /		\sim				
		(
Pay \$	Adverse X	Ac	count charged: Concu	1A01	_ ^{2J01} _	2H01
Claims Manager:	while	u_				<u> </u>
Committee Action:	**************************************		_Council Acti	on	····	
/						

FORM 23-61

RECEIVED ADD 6 20 2000

COUNCIL OF THE CITY OF ATLANTA MUNICIPAL CLERK

City Hall

35 Trutty Avenue, S.W. Atlanta, Georgia 30335

RE: CLAIMFOR DAMAGES

 $\mathbf{ENTERED} \ - \ 4\mathbf{-}10\mathbf{-}00 \ - \ SB$ UUI US 33

		UULUZZ	O - MIKE KEEVED	
Dear Municipal	Clerk:			
- PATTO	TITA DOGITY IN	ury tor which I cor	damages in the amount ntend the City is liable.	sum of \$ 1738-61 property
1. Date of incide	ent: <u>02-25</u> (month/day,	~ OB	2. Police called	Yes No
3. Location of in	adent: <u>75</u> /	85 ME	EDom Pru	7
	insurance company:			Policy No.
5. State what and	d how incident occur	red: A Blac	K Ferale wa	us Driving a Nidsago
and b	time at-	the rear	at 50/50 not	and messed up the
rear of-	the lay. T	Inon watel	2 (alled 911	for an officer. He
ALLESTIMA	TES AND DAMAGI	S ARE STRIECT T	O INSPECTION. THE AY RESULT IN CRIMI	ouer prince
The registered estimates of re	d owner must make pair and proof of ov	e the claim to v		
Your vehicle:		(99)		DATILD OF DRINGER
	(make)	(year)	(tag number)	(driver's name)
City vehicle:				
	(make)	(City driver	's name)	(department/bureau)
Witness:				
	(name)	-	(address)	(telephone number)
The acknowled State law, nor	dgement of this claim is it an admission of	n in no way waive Hability on benalf	s the Sovereign immuni of the City of Atlanta	
	uld be mailed imme			
HEREBY SWI	EAR OR AFFIRM THE 'N IS TRUE AND CO	HAT THE ABOVE DRRECT.	DAVID	OLORUN FEM 1
			P. O.	BOX 89174
00- _L	-0920		#7 LAN	VTA - GA 30312
		1	(UM) 69B-4	1611 (770) 429-782

work number)

'home number)

RECEIVED ADD & 2000.

COUNCIL OF THE CITY OF ATLANTA

MUNICIPAL CLERK

City Hall

55 Trinity Avenue, S.W.

Atlanta, Georgia 30335

RE: CLAIMFOR DAMAGES

Today's Date: 04/

ENTERED - 4-10-00 - SB

3.2.00		00L0223	MIKE REEVES	
Dear Municipal Clerk:				
	- poemá minta to	or which I cont	amages in the amount end the City is liable.	sum of \$ 1738-61 property
Date of incident:	$02-25\sim 0$	<u>b</u>	2. Police called:	Yes No
. Location of incident: _	75/80	2 MET	Dom Prw	7
Name of your insurance	e company:			Policy No.
. State what and how in	adent occurred:	A Blace	K Ferale wa	s Driving a Nichsan
and his me	at The	rear a	£ 50/50 nph	and maked in the
rear of the	ar. 7 1970	recately	Called 911	For an officer . He
ALLESTIMATES AN	DDAMAGES AR	F SI IRIECT TO	INSPECTION. THE NAME OF THE NA	min and the
The registered owner	must make the	e claim the vol		
Your vehicle: 101	OLA	(99)	47) JAN	DAVID OLDRUNFEN
City vehicle:	ie,	(year)	(tag number)	(driver's name)
(mak	e)	(City driver)	s name)	(department/bureau)
Witness:				,
inam	e)		(address)	(telephone number)
The acknowledgement State law, nor is it an a	of this claim in n dmission of fiabi	no wav warves lity on benaif c	the Sovereign immunit of the City of Atlanta a	
This claim should be m	ailed immediatel	ly to the addres	s shown above.	
HEREBY SWEAR OR NECRMATION IS TRE	AFFIRM THAT	THE VECUE	DAVID	OLORUN FEM 1
			P. O. B	BOX 89174
00- ₆ -09:	20		#7 LAN	TA - GA 30312

Atlanta City Council

Regular Session

*

Consent Agenda pgs. 1-13

SEE ATTACHED LISTING OF ITEMS ADOPTED/ADVERSED ON CONSENT AGENDA

Adopt

YEAS: 11

NAYS: 0

ABSTENTIONS: 0

NOT VOTING: 2

EXCUSED: 0

ABSENT 3

ITEM (S) REMOVED FROM NV McCarty Y Dorsey Y Moore Y Thomas Y Starnes Y Woolard **CONSENT AGENDA** Y Martin B Emmons Y Bond Y Morris Y Maddox B Alexander 00-0-0982 B Winslow Y Muller Y Boazman NV Pitts 00-O-0996

00-R-0954 00-R-0981 00-R-0999

*

	07/05/00 Council Meeting
ITEMS ADOPTED ON	ITEMS ADVERSED ON
CONSENT AGENDA	CONSENT AGENDA
CONSENT AGENDA	
1. 00-O-0882	38. 00-R-0914
2. 00-O-0815	39. 00-R-0915
3. 00-O-0986	40. 00-R-0916
4. 00-O-0987	41. 00-R-0917
5. 00-O-0988	42. 00-R-0918
6. 00-O-1002	43. 00-R-0919
7. 00-0-0574	44. 00-R-0920
8. 00-O-0972	45. 00-R-0921
9. 00-O-0818	46. 00-R-0922
10. 00-R-0990	47. 00-R-0923
11. 00-R-0992	48. 00-R-0924
12. 00-R-0993	49. 00-R-0925
13. 00-R-0885	50. 00-R-0926
14. 00-R-0884	51. 00-R-0927
15. 00-R-0883	52. 00-R-0928
16. 00-R-0880	53. 00-R-0929
17. 00-R-0814	54. 00-R-0930
18. 00-R-0957	55. 00-R-0931
19. 00-R-0961	56. 00-R-0932
20. 00-R-0998	57. 00-R-0933
21. 00-R-0887	58. 00-R-0934
22. 00-R-0888	59. 00-R-0935
23. 00-R-0889	60. 00-R-0936
24. 00-R-0997	61. 00-R-0937
25. 00-R-0892	62. 00-R-0938
26. 00-R-0955	63. 00-R-0939
27. 00-R-0984	64. 00-R-0940
28. 00-R-1000	65. 00-R-0941
29. 00-R-0908	66. 00-R-0942
30. 00-R-0909	67. 00-R-0943
31. 00-R-0910	68. 00-R-0947
32. 00-R-0911	69. 00-R-0948
33. 00-R-0912	70. 00-R-0949
34. 00-R-0913	71. 00-R-0950
35. 00-R-0944	72. 00-R-0951
36. 00-R-0945	
37. 00-R-0946	